



STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL  
AND FINANCIAL REGULATION  
OFFICE OF LICENSING & REGISTRATION  
35 STATE HOUSE STATION  
AUGUSTA, MAINE  
04333-0035

JOHN ELIAS BALDACCI  
GOVERNOR

ANNE L. HEAD  
DIRECTOR

Enclosed is a complaint form. Prior to filing your complaint, it is recommended that you contact the dealer and/or manufacturer, in writing, on problems that exist with your new home.

According to the Maine Manufactured Housing Warranties Act, 10 M.R.S.A. § 1404, *"...the manufacturer or dealer or both shall take appropriate corrective action at the site of the home in instances of substantial defects in materials or workmanship, which become evident within one year from the date of the delivery of the home to the consumer, provided the consumer or his transferee gives written notice of such defects to the manufacturer or dealer at their business address not later than one year and 10 days after date of delivery..."*

If you have contacted the dealer and/or manufacturer and service work has not been scheduled or the problems continue to exist, send to Complaints Division, at the address above, as soon as possible. You may wish to make a copy for your personal records. Also, please send us a copy of your agreement and copies of all papers pertinent to your complaint.

NOTE: If you fail to provide the requested information, our investigation of your problems may be delayed.

**Please be advised that the Manufactured Housing Board does not have jurisdiction on cosmetic, contractual or issues that are beyond the warranty period.**



PRINTED ON RECYCLED PAPER

PHONE: (207)624-8660 (Voice)

(207)624-8653 (TTY)  
OFFICES LOCATED AT: 122 NORTHERN AVENUE,  
GARDINER, MAINE

FAX: (207)624-8637



Complaints and Investigations Division  
35 State House Station  
Augusta Maine 04333  
(207) 624-8660

Office Located at:  
122-124 Northern Avenue  
Gardiner ME

## MANUFACTURED HOUSING COMPLAINT FORM

Name \_\_\_\_\_

Address \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City or Town) (State/Zip Code) (County)

Telephone ( ) \_\_\_\_\_

Type of Unit: (Mobile \_\_\_) (Modular \_\_\_) (Other \_\_\_) if Other, please explain. \_\_\_\_\_

Manufacturer \_\_\_\_\_

Plant Location \_\_\_\_\_

Date of Manufacture \_\_\_\_\_ Model # \_\_\_\_\_ Serial # \_\_\_\_\_

Purchased From \_\_\_\_\_

\_\_\_\_\_  
(Street) (City or Town) (State/Zip Code)

Purchase Date \_\_\_\_\_ Did you finance the purchase of the home? (Yes\_\_\_) (No\_\_\_)

Who is the lender? \_\_\_\_\_

Did you pay a down payment? (Yes\_\_\_) (No\_\_\_) Source of down payment? \_\_\_\_\_

Installer (if other than the dealer) \_\_\_\_\_

Has manufacturer and/or dealer been contacted? \_\_\_\_\_ List dates \_\_\_\_\_

Have you previously filed a complaint with this Board? \_\_\_\_\_ If so, list dates \_\_\_\_\_

**Please list and number the specific complaint items below:**

1. \_\_\_\_\_

\_\_\_\_\_

Lined area for text entry.

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

(Complainant's Signature)

(Date)